Application Data Sheet

APPLICATION INFORMATION

Application Number::

Filing Date::

03/10/05

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD Disks:

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of Copies of CRF::

Title::

MICROCAPSULES USED FOR PRODUCING

RUBBER AND METHOD FOR THEIR PRODUCTION

Attorney Docket Number::

234682

Request for Early Publication?:: No

Request for Non-Publication?::

No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?::

No

Latin Name::

Variety denomination name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

APPLICANT INFORMATION

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Germany

Status::

Full Capacity

Given Name::

Monika

Middle Name::

Family Name::

JOBMANN

Name Suffix::

City of Residence::

Buxtehuder

State or Prov. of Residence::

Country of Residence::

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Street of mailing address::

Beim Kloster Dohren 65B

City of mailing address::

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State or Province of mailing address::

Country of mailing address::

Germany

Postal or Zip Code of mailing address:: D-21614

Inventor Authority Type::

Inventor

Primary Citizenship Country::

Germany

Status::

Full Capacity

Given Name::

Gerald

Middle Name::

Family Name::

RAFLER

Name Suffix::

City of Residence::

Potsdam

State or Prov. of Residence::

Country of Residence::

Germany

Street of mailing address::

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City of mailing address::

Potsdam

State or Province of mailing address::

Country of mailing address::

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Postal or Zip Code of mailing address:: D-14473

Applicant Authority Type::

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Primary Citizenship Country::

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Status::

Full Capacity

Given Name::

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Family Name::

SAGALA

Name Suffix::

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State or Prov. of Residence::

Country of Residence::

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City of mailing address::

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State or Province of mailing address::

Country of mailing address::

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Postal or Zip Code of mailing address:: D-71032

Inventor Authority Type::

Inventor

Primary Citizenship Country::

Germany

Status::

Full Capacity

Given Name::

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Middle Name::

Family Name::

GROSS

Name Suffix::

City of Residence::

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State or Prov. of Residence::

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REPRESENTATIVE INFORMATION

Representative Customer Number::

23460

Representative Designation::

Registration Number::

Representative Name::

DOMESTIC PRIORITY INFORMATION

Application::

Continuity Type::

Parent Application::

Parent Filing Date::

FOREIGN APPLICATION INFORMATION

Country::

Application Number::

Filing Date::

Priority Claimed

PCT

PCT/EP03/009825

09/04/03

Yes

DE

102 41 942.6

09/10/02

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Yes

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